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FACSIMILE TRANSMISSION COVER SHEET

Date: December 7, 2007

To: United States Patent and Trademark Office
Examiner: Riyami, Abdulla A.; Art Unit: 2609

Fax: (571) 273-8300

Re: **Application Serial No.: 10/806,800**
Filing Date: 3/23/2004; First-Named Inventor: Fayad
Attorney Docket No.: 01CON247P-CON

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 19

Message:

Enclosed please find the Response to Final Office Action dated November 9, 2007.

Thank you.

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Attorney Docket No.: 01CON247P-CON

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Fayad, et al.

SERIAL NO.: 10/806,800 FILED: 3/23/2004

FOR: Methods and Apparatus for Data Communications through Packet Networks

HONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

☒ No additional fee is required.

☐ The fee has been calculated as shown below:

☐ EXTENSION FEE

	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

☐ TOTAL EXTENSION FEE \$ 0.00

☐ FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1 Number of Claims after Amendment	Column 2 Number Previously Paid for	Column 3 Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	26	MINUS **26	* = 0	x 50	x 25	\$
INDEPENDENT	3	MINUS ***4	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
 ** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
 *** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

99RSS183-CON

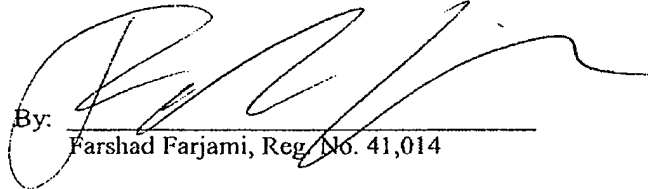
Attorney Docket No.: 01CON247P-CON

- ☐ Enclosed is the total fee of \$ _____ (Payment by Credit Card, Form PTO-2038 Enclosed).
- ☐ Please charge Deposit Account No. 50-1867 in the amount of \$ _____
- ☒ The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-1867. A duplicate copy of this sheet is enclosed.

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By:

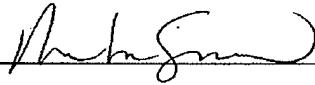

Farshad Farjami, Reg. No. 41,014CERTIFICATE OF FACSIMILE TRANSMISSION

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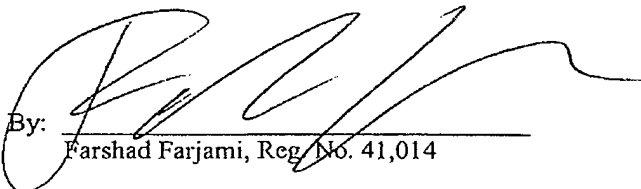
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Fayad, et al.	Group Art Unit: 2609
Application Serial No.: 10/806,800	Examiner: Riyami, Abdulla A.
Filed: March 23, 2004	
Title: Methods and Apparatus for Data Communications through Packet Networks	

RESPONSE TO FINAL OFFICE ACTION

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This is in response to the *Final* Office Action, dated November 9, 2007, in the above-referenced patent application. Please enter and consider the following remarks.